

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
101577191
FILING DATE
APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
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TOTAL IND.	2	↓			↓			↓						
TOTAL DEP.	32	←			←			←						
TOTAL CLAIMS	34	[REDACTED]			[REDACTED]			[REDACTED]						

BEST AVAILABLE COPY